

FIVE-YEAR COMPREHENSIVE EDUCATION PLAN

AUTHORIZED SIGNATURES AND CHECKLIST

Plan due to the Office of Public Instruction: May 1, 2003

DISTRICT	Ss No (School System No.)
	(School System No.)
Please check to confirm that all require Plan for the district are complete and p	red components of the Five-Year Comprehensive Education oresent.
District profile data has been co	mpiled and is on file at the district or school office.
The Five-Year Comprehensive the plan and a completed copy of	Plan Guidelines and Review Form has been used to review of the form attached to the plan.
School action plans and perform	ance targets are attached.
If one or more of the component Five-Year Comprehensive Plan	ts is not complete, that status is checked and explained in the Guidelines and Review Form.
If necessary, the district's plan located.	has been indexed to show where necessary components are
Authorized Signatures:	
I verify the information provided as pa	rt of the district's plan is complete and accurate.
Signature (Designated Authorized Represent	rative) Printed Name Date
Check One:Superintendent	
· `	is no Superintendent) ident (If there is no Superintendent or Principal)